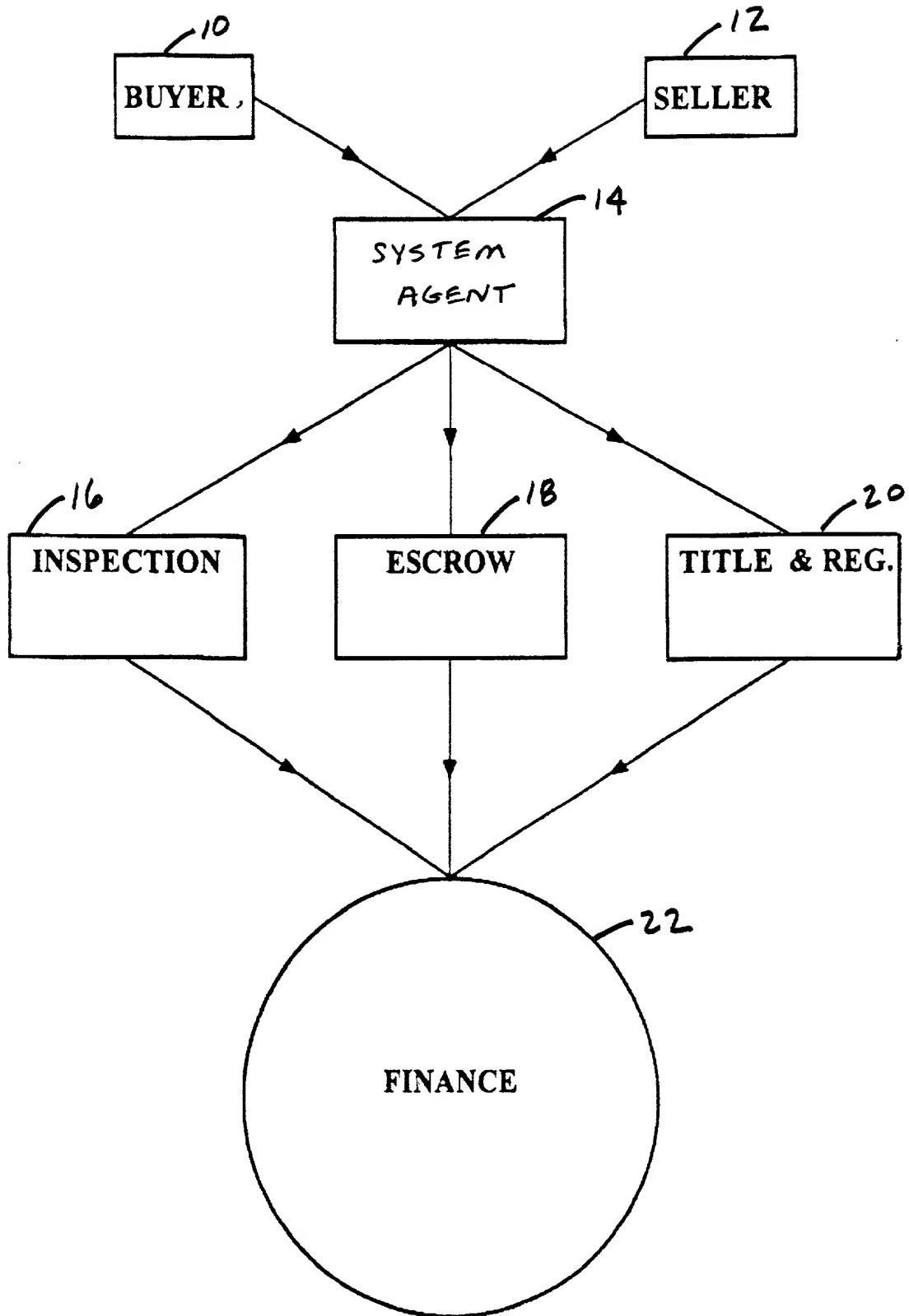


FIG. 1



INSPECTION

FIG. 2

GENERAL MECHANICAL INSPECTION

31

BODY AND INTERIOR INSPECTION

23

DATE	STOCK #	YEAR	MODEL	R.O. NO.
ADVISOR	TECH	VIN #		

27 POINT MAINTENANCE SERVICE INSPECTION

1. Condition of Front & Rear Tires	<input type="checkbox"/>	<input type="checkbox"/>
2. Alignment Condition	<input type="checkbox"/>	<input type="checkbox"/>
3. Condition of Front & Rear Shocks	<input type="checkbox"/>	<input type="checkbox"/>
4. Condition of All Steering and Suspension Components	<input type="checkbox"/>	<input type="checkbox"/>
5. Condition of Power Steering Components	<input type="checkbox"/>	<input type="checkbox"/>
6. Brake Pedal Adjustment	<input type="checkbox"/>	<input type="checkbox"/>
7. Parking Brake Adjustment	<input type="checkbox"/>	<input type="checkbox"/>
8. Condition of Front Brakes	<input type="checkbox"/>	<input type="checkbox"/>
9. Condition of Rear Brakes	<input type="checkbox"/>	<input type="checkbox"/>
10. Condition of Hydraulic System	<input type="checkbox"/>	<input type="checkbox"/>
11. Condition of Exhaust System	<input type="checkbox"/>	<input type="checkbox"/>
12. Engine Leaks	<input type="checkbox"/>	<input type="checkbox"/>
13. Transmission Leaks	<input type="checkbox"/>	<input type="checkbox"/>
14. Differential Leaks	<input type="checkbox"/>	<input type="checkbox"/>
15. Condition of Fuel Tank & All Fuel Lines	<input type="checkbox"/>	<input type="checkbox"/>
16. Condition of Radiator Hoses	<input type="checkbox"/>	<input type="checkbox"/>
17. Condition of Heater Hoses	<input type="checkbox"/>	<input type="checkbox"/>
18. Condition of Radiator	<input type="checkbox"/>	<input type="checkbox"/>
19. Drive Belts Worn or Loose	<input type="checkbox"/>	<input type="checkbox"/>
20. Condition of Battery	<input type="checkbox"/>	<input type="checkbox"/>
21. Condition of Battery Cables	<input type="checkbox"/>	<input type="checkbox"/>
22. Air Conditioning Operation	<input type="checkbox"/>	<input type="checkbox"/>
23. Condition of A.C. Hoses	<input type="checkbox"/>	<input type="checkbox"/>
24. Condition of Lights and Horn	<input type="checkbox"/>	<input type="checkbox"/>
25. Condition of Windshield Wipers	<input type="checkbox"/>	<input type="checkbox"/>
26. Condition of Power Windows and Locks	<input type="checkbox"/>	<input type="checkbox"/>
27. Other (See Below)	<input type="checkbox"/>	<input type="checkbox"/>

COMMENTS:

28

24

Name _____ Phone _____

Address _____

26

Year _____ Make _____

Model _____ Style _____

Body _____ Color _____

VIN # _____

License # _____

Manager _____

25

27

Check Options Included on Vehicle

<input type="checkbox"/> ABS	<input type="checkbox"/> Leather Interior	<input type="checkbox"/> Air Conditioner	<input type="checkbox"/> AM/FM Radio
<input type="checkbox"/> Audio Tapes	<input type="checkbox"/> Power Windows	<input type="checkbox"/> Moon/Sun Roof	<input type="checkbox"/> AM/FM Cassette
<input type="checkbox"/> Cruise	<input type="checkbox"/> Power Locks	<input type="checkbox"/> Lockup/Shift Pkg	<input type="checkbox"/> CD/Changer
<input type="checkbox"/> 4 Wheel Drive	<input type="checkbox"/> Power Air Bag	<input type="checkbox"/> Custom Wheels	<input type="checkbox"/> Roof Rack

Van/Options

<input type="checkbox"/> Conversion Pkg
<input type="checkbox"/> High Top
<input type="checkbox"/> Dual Air
<input type="checkbox"/> Dual Tanks

CONVICTION OF VEHICLE

Indicate any damage to the vehicle in the space provided using your own words or the following legend:

H - Moderate Scratch	ST - Pitted	T - Torn	S - Bent	CC - Glass Cracked
M - Missing	SM - Scratched	R - Rusty	CR - Cracked	
B - Scratched	BT - Stained	BR - Broken	D - Dented	

FRONT

LEFT

RIGHT

REAR

29

MECHANICAL

OVERALL	GOOD	AVERAGE	POOR
Engine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TRANSMISSION	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
AXLE/DRIVE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
STEERING	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SAFETY	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I certify that the vehicle listed has been inspected and has been delivered in the condition described herein.

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TIREWEAR

	Good	Fair	Poor
Left Front			
Right Front			
Left Rear			
Right Rear			
Spares - Vehicle			

27 POINT MAINTENANCE SERVICE INSPECTION

DIGITAL
PICTURES
FRONT

DIGITAL
PICTURES
LEFT SIDE

COMMENTS
SECTION

DIGITAL
PICTURES
REAR

DIGITAL
PICTURES
RIGHT SIDE

34

36

35

ESCROW

FIG. 3

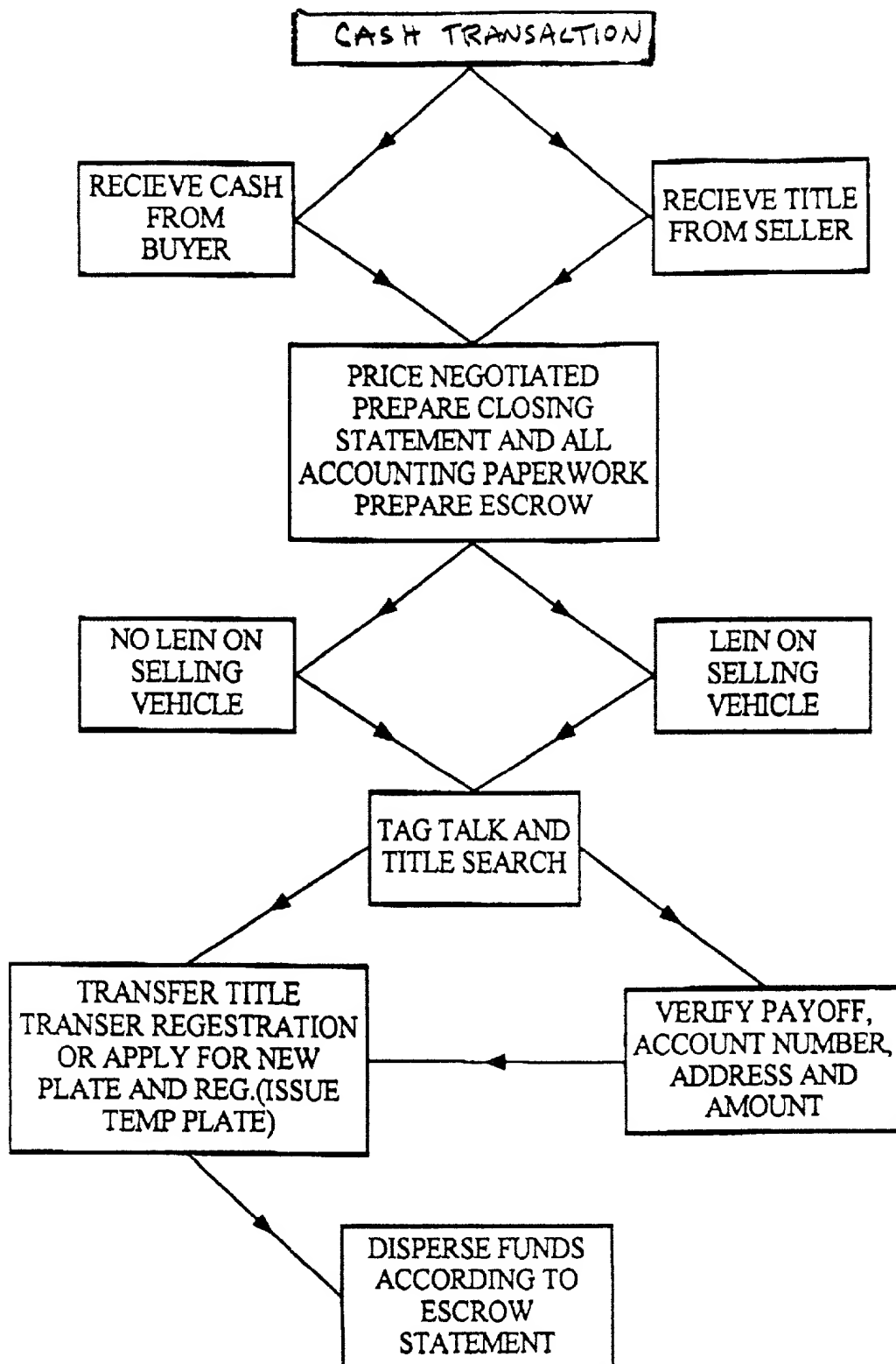
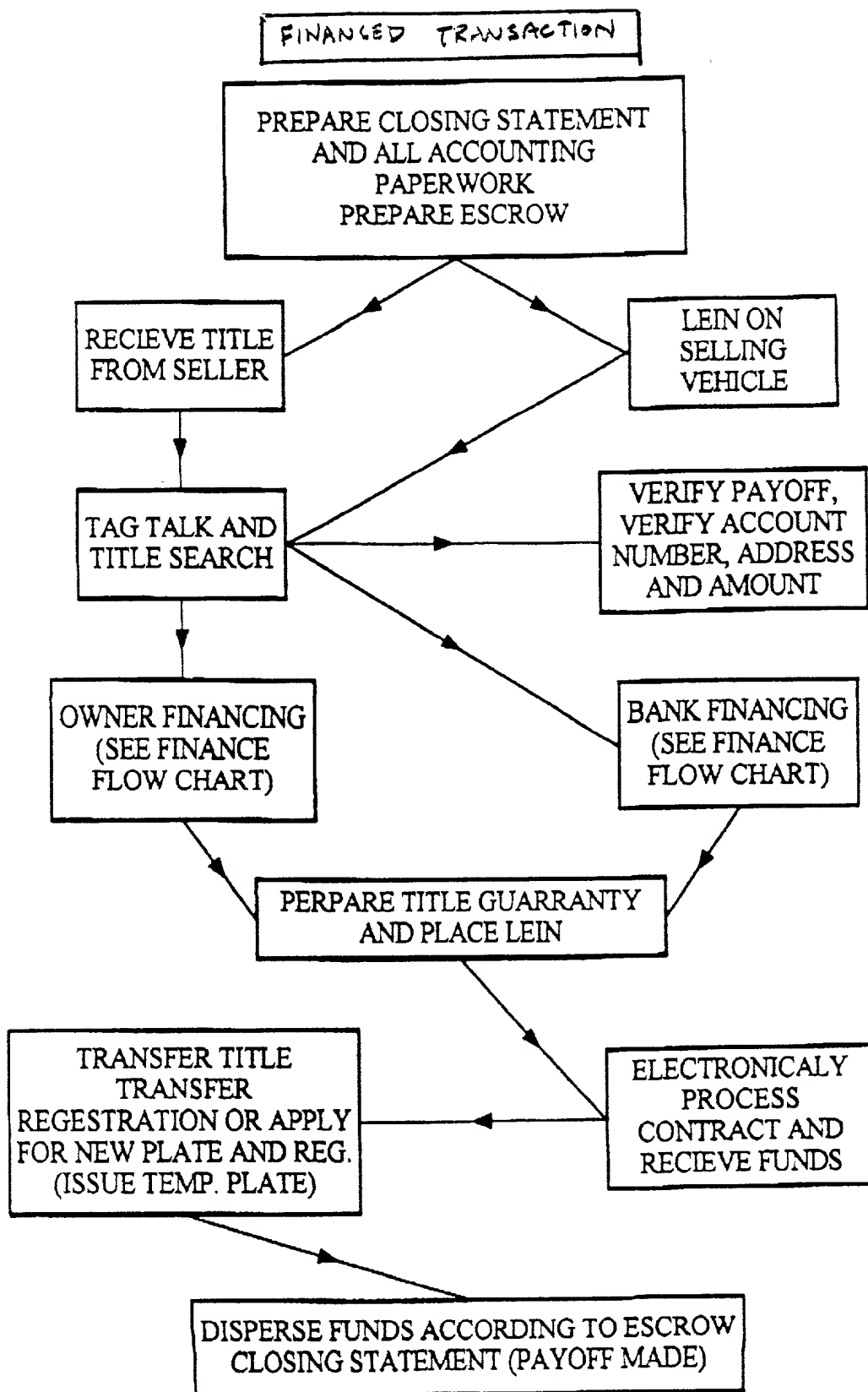
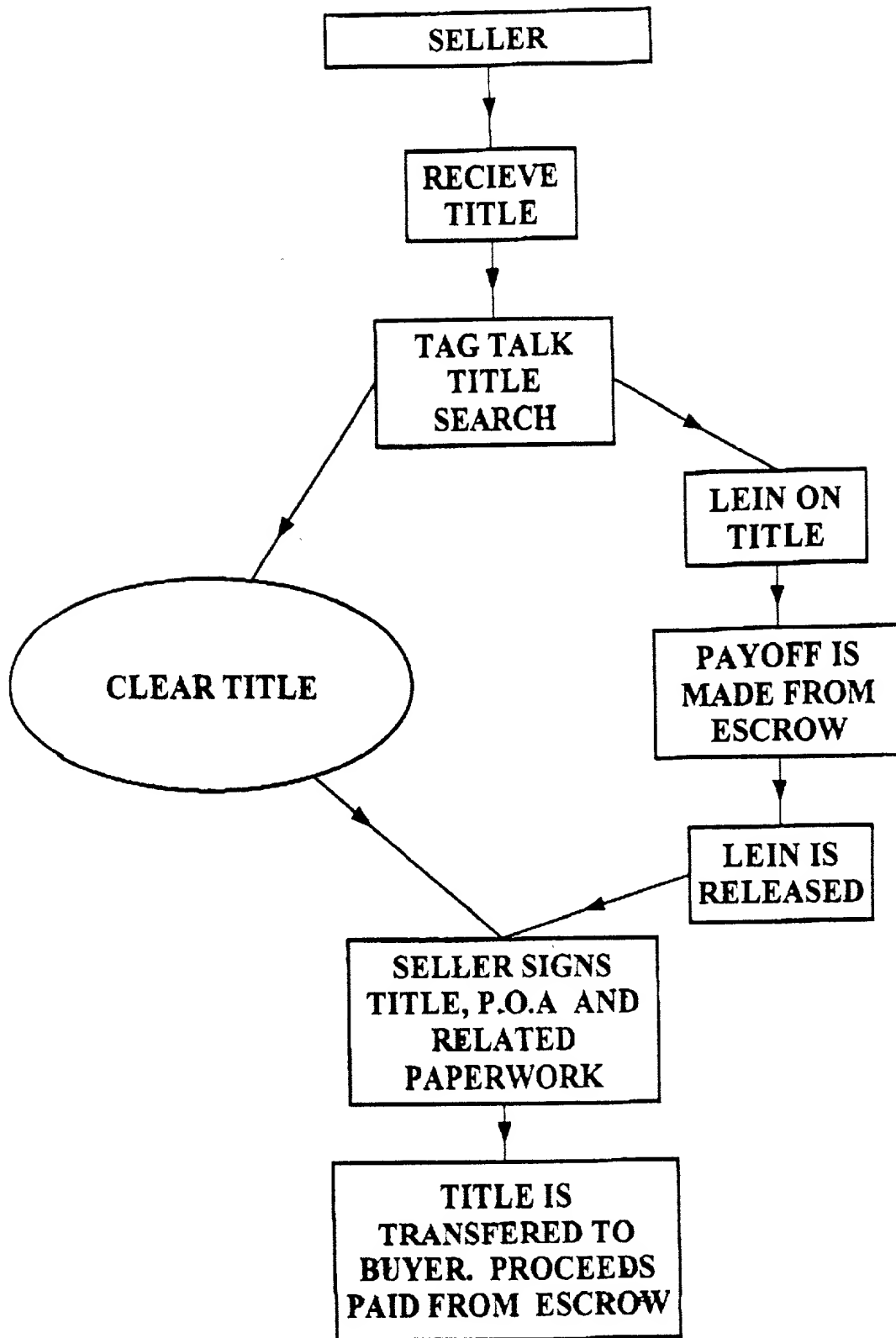


FIG. 4



TITLE & REGISTRATION
FIG. 5



FINANCE FLOW CHART

FIG. 6

